

<b>AUTHORITY TO CONSTRUCT AND PERMIT TO OPERATE APPLICATION</b>		<b>FOR APCD USE ONLY</b>	
		Date	Permit No.
			Amt Pd.
			Receipt
<b>COMPANY</b>	Company/Owner (Please Print or Type)	Company Contact	
	Mailing Address	Title	
	City, State & ZIP Code	Phone (       )	
<b>FACILITY</b>	Name of Facility	Facility Contact	
	Street Address	Title	
	City, State and Zip Code	Phone (       )	
<b>PREPARER</b>	Firm Name of Application Preparer	Name of Preparer	
	Mailing Address of Firm	Title	
	City, State & Zip Code	Phone (       )	
Type of Application ( <input checked="" type="checkbox"/> Check appropriate boxes)		<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> Authority to Construct – New Facility  <input type="checkbox"/> Authority to Construct – Modified Facility  <input type="checkbox"/> Permit Amendment  <input type="checkbox"/> Emission Reduction Credit  <input type="checkbox"/> Gasoline Dispensing Facility - Number of Nozzles (Gas Only) _____             </div> <div style="width: 50%;"> <input type="checkbox"/> Permit to Operate  <input type="checkbox"/> Title V (Major Source)  <input type="checkbox"/> Change/Transfer of Ownership  <input type="checkbox"/> Synthetic Minor Source Status             </div> </div>	
Is the location within 1000 feet from the boundary of a K – 12 school?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Brief Description of the Project/Request (attach detailed permit application information).			
For Permit Applications Involving Emissions Increases/Reductions: (Enter Emissions Change in <b>Pounds/Hour</b> )			
PM10 _____	VOC _____	SOx _____	NOx _____
CO _____			
Schedule of Operation	_____ hours/day    _____ days/week    _____ weeks/year		
What is this Facility's SIC (Standard Industrial Classification) Code?			
For Authority to Construct Applications, Complete the Following:			
Construction Start Date _____	Construction Completion Date _____	Equipment/Process Start-up Date _____	
Indicate where the Authority to Construct and/or the Permit to Operate and bills will be mailed		<input type="checkbox"/> Company <input type="checkbox"/> Preparer <input type="checkbox"/> Facility	
<b>Statement of Company's Responsible Person</b>  "I am familiar with the Rules and Regulation of the Placer County Air Pollution Control District and I certify that the information herein and the data submitted with the application is true with regards to the operation of the plant and /or equipment which is the subject of this application and that such operation will comply with said Rules and Regulations."			
Signature of Company's Responsible Person _____ Title _____			
Name (Printed or Typed) _____ Date _____			